2011 - 2012

Jacksonville Alumnae Panhellenic Membership Application

Name: _____ _____ _____
First Last Maiden

New Member: ☐ Renewing Member: ☐ Number of years in JAPA: ☐

Birthdate: _____ ___
Month Day

Spouse's Name _____ Home Phone: _____

Address: _____ Cell Phone: _____

_____

_____

Email Address: _____

College/University: _____ Sorority: _____

Occupation: _____ Work Phone: _____

Employer: _____

I want my newsletter through: Email ☐ Regular Mail ☐

Membership Dues	$30
Scholarship Donation	$_____
In memory of _____	
In honor of _____	
Directory Ad:	$_____
Business Card@ $10	
½ Page@$20	
Full Page @$40	
(Directory Chair will contact you regarding Ad copy)	
Total JAPA Support:	$_____

Scholarship Fund Recognition Levels:	
Supportive Sister	$15-$24
Generous Greek Giver	$25-$49
Panhellenic Patron	$50-$74
Athena Society	$75+

Please make checks payable to Jacksonville Alumnae Panhellenic Association and mail check and form to:

Wendy Hoffman Mueller - JAPA Membership Chairman
1122 Crown Drive
Jacksonville, FL 32221

Thank you for your interest and participation: